PTO/SB/17 (10-08)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
at to a collection of information unless it displays a valid OMB control number

Under the Paperwork Reducti	respond to a collection of information unless it displays a valid OMB control number								
Effective o	Complete if Known								
Frees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL  For FY 2009				Application Number 1		10/549,696-Conf. #9538			
						September 19, 2005			
						Junji TAKENAKA			
						J. D. Freeman			
Applicant claims small entity status. See 37 CFR 1.27				Art Unit	794				
TOTAL AMOUNT OF PAYMENT (\$) 630.00		(\$) 630.00	Attorney Docket No.		No. 10	1691-0209PUS1			
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
X Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
X Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
	FILIN	NG FEES	SE	ARCH FEES	<b>EXAMINA</b>	ATION FEES			
	- (A)	Small Entity	- (4	Small Entity	- (A)	Small Entity			
Application Type	Fee (\$)	Fee (\$)	Fee (\$		Fee (\$)	Fee (\$)	Fees Pa	aid (\$)	
Utility	330	165	540	270	220	110			
Design	220	110	100	50	140	70			
Plant	220	110	330	165	170	85			
Reissue	330	165	540	270	650	325		!	
Provisional	220	110	0	0	0	0			
2. EXCESS CLAIM FEES								mall Entity	
Fee Description							Fee (\$)	Fee (\$)	
Each claim over 20 (including Reissues)							52	26	
Each independent claim over 3 (including Reissues)							220	110	
								195	
Total Claims Extra Claims Fee (\$)			Fee Paid (\$)		Mu	Multiple Dependent Claims			
13 -20 or HP		x 52.00 =	0.00				ee Paid (\$)		
HP = highest number of total claims paid for, if greater than 20.									
	Claims	Fee (\$)	F	ee Paid (\$)				-	
4 -4 or HP =		× 220.00 =		0.00				i	
HP = highest number of independe			3.						
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
	ra Sheets	• • • •		dditional 50 or frac	tion thereof	Fee (\$)	Fee P	aid (\$)	
		· · · · · · · · · · · · · · · · · · ·							
/50 = /50 = (round up to a whole number) x = 4. OTHER FEE(S)								Fees Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1252 Extension for response within second month								0.00	
1814 Statutory Disclaimer 140.00								0.00	
SUBMITTED BY A A D									
Signature //// / // / // / F				Registration No.	20 404	181 Telephone (703) 205-8000			
signature The live			(Attorney/Agent)	32,181	· ·				
Name (Print/Type) Marc S. W	einer					Date -	EB 202	009 l	

